

Impacts of Reductions to OSDH State General Appropriation 01-18-2016

The Oklahoma State Department of Health has been notified that SFY 2016 General Appropriation funding to the Department will be reduced by \$1.8 million or 3% over SFY 16 appropriation levels

General Appropriation

OSDH will take the following actions to mitigate the impact of the reductions to agency state appropriations.

- *Federally Qualified Health Centers (FQHC) Start Up Funding- \$319,531*
OSDH will eliminate funds in the amount of \$319,531 that supports the FQHC Startup Program and will prevent the OSDH from contracting and assisting with the expansion of FQHCs in Oklahoma communities, such as contracts for community needs assessment, strategic planning, community development, grant application development, and/or additional technical assistance regarding FQHC startup and development. Because FQHCs are safety-net primary care providers and offer a sliding fee scale for low-income uninsured patients, the reduction in funds to the FQHC Startup Fund impacts more than 360,000 low-income (below 200% of FPL) uninsured citizens in Oklahoma. Note: OSDH's ability to disburse these funds for the intended legislative purpose is dependent on HRSA New Access Funding Announcements which have not been released to date.
- *Cord Blood Bank - \$500,000*
The OSDH will eliminate support in SFY 2016 for cord blood bank planning efforts in the amount of \$500,000.
- *Reduce State Support for the Federal Women, Infants and Children (WIC) Supplemental Nutrition Program – \$142,766*
The OSDH will eliminate all state funding used as support to county health department WIC operations. **This reduction will not impact the amount of supplemental food instruments or nutrition services offered to clients nor will it impact WIC contractors.** The reductions have the potential to impact local health departments in the following ways: reduce screening for public health services to required minimum for WIC program, assume overhead costs in excess of federal funding and realize operational efficiencies to reduce administration of administering WIC program.
- *OSDH Financial Management (Administration) - \$450,000*
OSDH will make a onetime reduction to Financial Management Services that impact the ability to fill eight critical positions for SFY-16 that have gone unfilled due to difficulty recruiting qualified applicants. These positions will need to be reinstated for SFY-17 to meet the demands of Financial Services to adequately process financial transactions in an accurate and timely manner. Currently, the need has been met with contract staff or current staff taking on additional duties that cause staff to work overtime, transactions to be delayed such as federal reporting requirements, programmatic budget reporting, and payments to OSDH vendors. Impacted positions consist of two Budget Analysts, two Accountants, and four Accounting Technicians. Financial Management Services is working to identify streamlined systems and processes that will ultimately reduce the number of staff needed to process day-to-day transactions.

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- Public Health Laboratory State Funding - \$950,195 – this one is tough to describe.
Off-set with 210 and 400 funding – Medicaid Match budgeted on state in the amount of \$700,000 (\$171,920 expended) remaining encumbrance of \$518,080 moved to 210YP/210KY. Additional state funds budgeted in the lab for lab supplies in the amount of \$568,716 (\$85,601 expended) will move encumbrance, projection and available balance totaling \$483,115 to 400GM/400G2.
- Strategic Planning (STEP-UP) Software Purchase - \$220,000
The OSDH will not pursue an update to the Strategies Toward Excellent Performance – Unlimited Potential (STEP-UP) system in SFY-16. Step-Up is the OSDH electronic performance management system that has been established for the purpose of tracking progress with the agency strategic plan across program areas, county health departments and Strategic Targeted Action Teams (STAT) which focus on public health priorities that often cut across multiple program areas. Step-Up is the mechanism by which OSDH maintains compliance with the Public Health Accreditation Board (PHAB) requirement for the maintenance of a performance management system. Quality Improvement tools, libraries and training materials are also housed within the Step-Up system. The system provides accountability for the completion of strategic plans and the attainment of performance measures, and provides a mechanism for leadership to monitor progress of all strategic priorities at quarterly intervals. Individual strategic plans, quarterly reports, annual reviews and performance measures can be obtained on-demand along with data trends. The OSDH will continue to utilize the current system and not pursue the system upgrades (cost include software and IT support).
- Dental Services - \$80,000
OSDH will eliminate two temporary dental health educators providing dental health education services and will impact 75,024 encounters statewide. Dental diseases are among the most prevalent health problems in Oklahoma. Although oral diseases are considered highly preventable with knowledge currently available, most of the state's population is affected with some form of dental disease at some time during their lives. Since most dental disease is preventable, dental professionals can influence the course of this disease through preventive measures such as fluoridation programs, dental education and tobacco-use prevention programs, dental sealant programs, and regular dental visits. Teeth are necessary for appearance, for proper speech, and to properly chew food. Untreated dental diseases affect the quality of life of all Oklahomans and can result in very serious health problems.
- Colorectal Cancer Screenings - \$100,000
Colorectal cancer is the third most commonly diagnosed cancer in Oklahoma among men and women. This cancer can be detected early through the use of colonoscopies, which is the gold standard for colorectal cancer screening. Colonoscopies can also prevent development of colorectal cancer by removing pre-cancerous polyps and lesions. Since 2007, the Oklahoma State Department of Health (OSDH) has received funding from the Oklahoma State Legislature to provide colorectal cancer screening and education for eligible Oklahoma residents.

The OSDH Colorectal Cancer Screening Program (CCSP) is intended to provide screening to individuals at average risk for colorectal cancer as reflected in the most current U.S.

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Preventative Task Force Guidelines for colonoscopy screening. In order to receive a no-cost colonoscopy through the OSDH CCSP, an individual must be an Oklahoma resident, United States citizen, low income (185% of current Federal Poverty Level), uninsured, and between the ages of 50-64.

In SFY14, 287 individuals received screenings and services (which may include removal of tumors, polyps or other lesions) at an average cost of \$1,141.53 per colonoscopy. In the first half of SFY15, 108 colonoscopies have been performed. Significant lesions are defined as lesions that have abnormal pathology which if not addressed could become cancerous over time. Lesions identified in screening are either removed or the patient receives more frequent screenings in the future potentially preventing the lesions from becoming cancerous. A reduction of \$100,000 would impact approximately 87 Oklahomans that would not receive these life saving services.

- *Injury Prevention Services - \$100,000*

The Injury Prevention Service would not refill on vacant Epidemiologist II position (PIN 34002530) responsible for surveillance and data analysis for violent death reporting across Oklahoma. Position is responsible for the dissemination of information to public and private partners and other interested stakeholders. Responsibilities are currently being managed by a student apprentice.

- *Oklahoma State Athletic Commission - \$12,000*

The impact of a \$12,000 reduction impacts the training opportunities for the Athletic Commission inspectors and reduction of attendance by Board Commissioners to national conferences. The Athletic Commission will rely heavily on fee funding.